FOR INSTRUCTIONS, SEE BACK OF FORM	Γ	FORM	
		DR-2	DISCLOSURE
DISCLOSURE SUMMARY PAGE	_	(Rev. 01/98)	REPORT
SOOS 9 NAL		or Office Use O	
COMMITTEE NAME (Must be same as on Statement of Organization)		Comm. #	7101
Boye for Supervisor 2002	, ,	ndexed <u>SW</u>	
IMPORTANT: Indicate type of committee you are reporting for:	1 1	udited omputer	
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate		omputer	
(5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support State of Candidates			
len Porne 641-435-2048		12/	16/02
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE		DATE SI	<u> </u>
Routine Penalties Due For Late Filed Reports Range from	om \$20	0 to \$800	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:	ı		
I AM FILING A Tan 19 2003 REPORT FOR ANA (1) ELEC	TION /(2	NON-ELECTION	ON YEAR.
(report date) Indic	cate one		
CHECK IF AMENDMENT TO REPORT DATED	cai Com	mittees, enter Dat	e of Election
	Dov		
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.	ounty & L	ocal Committees,	
(You must continue to file reports until a Notice of Dissolution is filed.)	nich Elect	ion is held	1
STATEMENT OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (This is the total			
of all monies held by the committee. This amount MUST be the			
same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.).	æ	11.3	86
ADD TOTAL MONEY TAKEN IN THIS PERIOD	Ф		<u>8 V</u>
Schedule A: Cash Contributions total (Attach Schedule A)		487	3.9
Schedule F: Loans Received total (Attach Schedule F)			
Schedule H: Total Sales of Campaign Property (Attach Schedule H)			
(Schedule H applies to Candidates' Committees Only)			
(Schedule H applies to Candidates' Committees Only) SUB-TOTAL		,	25
SUB-TOTAL.		le51.	25
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	\$	le51.	25 .25
SUB-TOTAL.	\$	651.	25 .25
SUB-TOTAL SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B)	\$	651.	25
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B)	\$	651.	25
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B)	\$	651.	25
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) Schedule F: Loan Repayments total (Attach Schedule F) CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	651. 651	25
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) Schedule F: Loan Repayments total (Attach Schedule F) CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ \$ \$	651. 651	25
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) Schedule F: Loan Repayments total (Attach Schedule F) CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) UNPAID BILLS (From Schedule D - Attach Schedule D) IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	651. 651 0	25
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) Schedule F: Loan Repayments total (Attach Schedule F) CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) UNPAID BILLS (From Schedule D - Attach Schedule D) IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	651. 651 0	25
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) Schedule F: Loan Repayments total (Attach Schedule F) CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) UNPAID BILLS (From Schedule D - Attach Schedule D) IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	651. 651 0	25 . 25

FOR INSTRUCTIONS, SEE BACK OF FORM

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

For instructions	, See	Back	of	Form
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CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate s	Outour mandada	
COMMITTEE NAME (Must be same as on Statement of Organization)		CHECK THIS BOX IF AMENDING FORM
Doge	for Supervin	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
· ·	ID#	Leland Zwanginzer 1014 Ceder Crest		\$	
11/25	CK#	Nasha In Arne Boge 2160 Ann horst Pl		50,00	
1	ID#	arne Boge			
11/25	CK#	Chardes City, In 50616		300,00	
1	ID#	Clan Popper			
11/31	CK#	1566 2700			
	ID#	Nashua In 50688		100,00	
12/08		arnie Bone + Pl 2160 Amhers + Pl			
	CK#	Charles City In		37, 39	
	ID#			2112	
~	CK#				
`	ID#	-			
ı	CK#	·			
	ID#		· · · · · · · · · · · · · · · · · · ·		
	CK#	•			
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
1	CK#				
			SLIB-TOTAL		

SUB-TOTAL

SCHEDULE

(Rev. 06/97)

MONETARY

RECEIPTS

TOTAL (if last page of this schedule)

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

,	CANDIDATE	NAME AND ADDRESS TO WHOM	PURPOSE	AMOUNT
DATE	ID NUMBER	EXPENDITURE	(DESCRIBE TRANSACTION)	EXPENDED
EXPENDED	(if applicable)	(Disbursement) WAS MADE		
(MM/DD/YR)	AND PAC			
	CHECK NUMBER			
	ID#		~ 0 01	
11/25	10#	arnic Boge + Al	report for add	
	CK#		in the	\$ 500,00
1018	1018	Charle City In 50016	repair for add	563.76
11/31	ID#	Nashwa Reporter		
131	CK#	Box 67	1 4	
torg	1019	Nashun I, 50658	add	96.00
12/3	ID#	Nashon Raporter		
	CK#	Box 67	-	
1020	1020	Nashan I. 50658	That you add	5,00
	ID#	Godstan Shidio	Them so add Tohank you gifts for votinteer campain	
	014	309 Main St	t't a sound	
12/6	CK# 102(Nashua Ia 50688	workers	50.25
	ID#	, , , ,		
	CK#			
	CN#			
	ID#			
	CK#			Ì
	ID#			į
	CK#			ì
	ID#			
	CK#			[
				FIRE
			CUD TOTAL	1011111

SUB-TOTAL

TOTAL (if last page of this schedule)

\$ 716,01

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page / L of \ (